



**ILLINOIS STATE TREASURER'S
CULTIVATE ILLINOIS: Storm and Drought
PROGRAM APPLICATION**

NO INSURANCE COVERAGE LOAN

The undersigned (Borrower) hereby requests _____ (loan amount) from _____ (Financial Institution) of _____ (city) under the State Treasurer's 2008 Storm and Drought Loan Deposit Program. Borrower acknowledges that funds shall be used for costs related to disaster recovery in Illinois in 2008. Borrower certifies that he or she DOES NOT HAVE THE PROPER INSURANCE COVERAGE to eventually pay for the costs caused by the disaster. Borrower further acknowledges that he or she is not a director, officer or employee (or spouse thereof) of the financial institution making the loan. The borrower certifies that all of the representations made in the application are true and correct.

BORROWER INFORMATION:

Borrower's Name: _____ Social Security #: _____
Address: _____
City, State, Zip: _____ County: _____
Phone Number: _____ E-mail Address: _____
Disaster Declaration Date: _____
How did you hear about our program? _____

Name of Insurance Company: _____
Insurance Co. Phone Number: _____ Policy #: _____

Reason for Loan:

Estimated costs and expenses (Borrower must provide estimates and quotes to support amount): \$ _____

CHECK ONE:

<u>Amount of Costs & Expenses</u>	<u>Length of Deposit</u>	<u>Renewal Period</u>
<input type="checkbox"/> \$0 - \$5,000	12 months (interest only)	Not applicable
<input type="checkbox"/> \$5,001 - \$10,000	24 months (interest + principal)	Not applicable
<input type="checkbox"/> \$10,001 - \$25,000	36 months (interest + principal)	2 years, 1 year renewal
<input type="checkbox"/> \$25,001 - \$50,000	48 months (interest + principal)	2 years, 2 year renewal
<input type="checkbox"/> \$50,001 and up	60 months (interest + principal)	2 years, 3 year renewal

Borrower's Signature: _____ Date: _____

FINANCIAL INSTITUTION INFORMATION:

Financial Institution's Name: _____
Address: _____
City, State, Zip: _____
Loan Officer: _____
Phone Number: _____ Fax Number: _____ E-mail Address: _____

Please return the completed application to:
Illinois State Treasurer Alexi Giannoulis
Banking Division, 300 West Jefferson Street, 2nd Floor, Springfield, Illinois 62702
Phone: (217) 782-2072 • Fax: (217) 522-1217 • www.treasurer.il.gov